Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Gary First name Lynn Middle name Anderson, II Last name and Suffix (Sr., Jr., II, III)	Jessica First name Sue Middle name Anderson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Gary L Anderson Jessica Eversole	Jessica S Anderson
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4022	xxx-xx-0938

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
5.	Where you live	249 W Dayton Yellow Springs Rd., Apt 147	If Debtor 2 lives at a different address:
		Fairborn, OH 45324 Number, Street, City, State & ZIP Code Greene County	Number, Street, City, State & ZIP Code County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) 	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 otor 2	Gary Lynn Anders Jessica Sue Ande					Case number (if known)	
Par	t 2:	Tell the Court About \	∕our Banl	kruptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Ban te box.	kruptcy
	choo	sing to file under	☐ Chap	oter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			■ Chap	oter 13				
8.	How	you will pay the fee	ab ord a p	out how your der. If your ore-printed	ou may pay. Typio attorney is subm address.	cally, if you are paying the fee you itting your payment on your beh	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or o on, sign and attach the <i>Application for Individual</i>	, or money check with
			L Th	e Filing Fe	ee in Installments	(Official Form 103A).	on, sign and attach the Application for individual	is io Fay
			— bu ap	t is not rec plies to yo	quired to, waive your family size and	our fee, and may do so only if you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove n installments). If you choose this option, you m cial Form 103B) and file it with your petition.	rty line that
9.		you filed for	■ No.					
		ruptcy within the B years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	Do y	ou rent your	□ No.	Go to	line 12.			
	resid	lence?	Yes.	Has yo	our landlord obtai	ned an eviction judgment agains	st you?	
			— 165.	•	No. Go to line 1		,	
					Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and file it w	vith this

	otor 1 Gary Lynn Anders otor 2 Jessica Sue Ande				Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Propriet	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code	
	it to this petition.		Check	k the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o cash-flov § 1116(1)	under Sul choosing t v statemen)(B).	ochapter V so that it o proceed under Su nt, and federal incor	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debt bchapter V, you must attach your most recent balance sheet, statement of operane tax return or if any of these documents do not exist, follow the procedure in 11	or or ations,
	For a definition of small	No.	ı am r	ot filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bank	ruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Co d under Subchapter V of Chapter 11.	de, and
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code Subchapter V of Chapter 11.	, and I
Par	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention	
14.		■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety?					
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Gary Lynn Anderson, II
Debtor 2 Jessica Sue Anderson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Gary Lynn Ander otor 2 Jessica Sue And	•			Case nur	mber (if known)	
Par	t 6: Answer These Ques	tions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consu individual primarily for a personal			defined in 11 U.S.C. § 10	1(8) as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investment				btain
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you owe the	hat are not consur	mer debts or busi	iness debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	So to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab				administrative expenses
	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured creditors?	d	Yes				
18.	How many Creditors do	■ 1-49		1 ,000-5,000		☐ 25,001-50,0	00
	you estimate that you owe?	□ 50-99)	5001-10,000		☐ 50,001-100,	
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	00	☐ More than10	00,000
19.	How much do you	\$ 0 - \$	650.000	□ \$1,000,001	- \$10 million	□ \$500,000,00	1 - \$1 billion
	estimate your assets to be worth?	□ \$50,0	001 - \$100,000	□ \$10,000,001			001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million)1 - \$500 million	☐ \$10,000,000 ☐ More than \$,001 - \$50 billion 50 billion
20.	How much do you	□ \$0 - \$	650,000	□ \$1,000,001	- \$10 million	□ \$500,000,00	11 - \$1 billion
	estimate your liabilities to be?	_ ' '	001 - \$100,000	□ \$10,000,001		_ ` ' ' '	001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 11 - \$500 million	☐ \$10,000,000 ☐ More than \$	0,001 - \$50 billion 550 billion
Par	t7: Sign Below						
For	you	I have ex	xamined this petition, and I declare	under penalty of p	perjury that the in	formation provided is true	e and correct.
			chosen to file under Chapter 7, I ar states Code. I understand the relief				
			orney represents me and I did not pont, I have obtained and read the no				ne fill out this
		I request	t relief in accordance with the chapt	ter of title 11, Unite	ed States Code,	specified in this petition.	
			tand making a false statement, con tcy case can result in fines up to \$2 1.				
		/s/ Gary	y Lynn Anderson, II		/s/ Jessica Sus		
			ynn Anderson, II e of Debtor 1		Jessica Sue . Signature of De		
		Execute	d on December 13, 2021		Executed on	December 13, 2021	
			MM / DD / YYYY			MM / DD / YYYY	

Debtor 1	Gary Lynn Anderson, II		
Debtor 2	Jessica Sue Anderson	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stephen Malkiewicz	Date	December 13, 2021
Signature of Attorney for Debtor		MM / DD / YYYY
Stephen Malkiewicz 0078836		
Printed name		
Richard E. West Co. LPA		
Firm name		
195 E. Central Ave.		
Springboro, OH 45066		
Number, Street, City, State & ZIP Code		
Contact phone 937-601-0401	Email address	ecf@debtfreeohio.com
0078836 OH		
Bar number & State		

Fill	in this inform	ation to identify your	case:			
Deb	otor 1	Gary Lynn Ander	son. II			
		First Name	Middle Name	Last Name		
	otor 2	Jessica Sue And				
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	T OF OHIO		
Cas	se number					
	own)				☐ Check	if this is an
					amend	ded filing
Su Be a infor your	mmary of s complete ar rmation. Fill o or original form	nd accurate as possibut all of your schedules, you must fill out a	ole. If two married people es first; then complete t	nd Certain Statistical Information e are filing together, both are equally responsible for the information on this form. If you are filing amend the box at the top of this page.	or supplyin	
Par	C1: Summa	rize Your Assets			Your as	ssets f what you own
1.	Schedule A/	B: Property (Official Fo	orm 106A/B)			2.22
	1a. Copy line	55, Total real estate, f	rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	13,667.66
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	13,667.66
Par	t 2: Summa	rize Your Liabilities				
						abilities you owe
2.			laims Secured by Propert mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	18,379.50
3.	Schedule E/F	F: Creditors Who Have total claims from Part	Unsecured Claims (Official 1) (priority unsecured clair	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	1,773.49
				claims) from line 6j of Schedule E/F	\$	37,907.89
				Your total liabilities	\$ \$	58,060.88
Par	t 3: Summa	rize Your Income and	l Expenses			
4.	Schedule I: Y	our Income (Official Fo	orm 106I)			
•				e I	\$	4,544.27
5.		Your Expenses (Official onthly expenses from li	,		\$	4,144.04
Par	t 4: Answer	These Questions for	Administrative and State	tistical Records		
6.	-	-	er Chapters 7, 11, or 137 on this part of the form. C	? Check this box and submit this form to the court with yo	our other sch	edules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,838.76

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	1,407.49
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	366.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,214.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	23,987.49

Debtor 1	Gary Lynn Anderso	•	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	Jessica Sue Ander	Middle Name	Last Name		
I Inited States R	ankruptcy Court for the: S	COLITHERN DISTRICT	OF OHIO		
Officed States De	ankruptcy Court for the.	DOUTILING DISTRICT	OI OI IIO		
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prope	rtv			12/15
	•		once. If an asset fits in more than	one category list the asset in	
hink it fits best. I	Be as complete and accurate	as possible. If two marrie	ed people are filing together, both	n are equally responsible for s	upplying correct
Answer every que		separate sneet to this for	m. On the top of any additional pa	ages, write your name and cas	se number (ir known).
Part 1: Describe	Fach Residence Building I	and or Other Real Estate	e You Own or Have an Interest In		
Part I. Describe	s Lacii Residence, Bullullig, I	Land, or Other Real Estat	s Tou Own of Flave an interest in		
I. Do you own or	have any legal or equitable in	nterest in any residence,	building, land, or similar property	/?	
■ No. Go to Pa	art 2				
☐ Yes. Where					
□ res. Where	is the property:				
Part 2: Describe	e Your Vehicles				
		able interest in any ve	hicles whether they are regis	stored or not? Include any v	obiolog you own that
Do you own, lea	ase, or have legal or equit		hicles, whether they are regisule G: Executory Contracts and		ehicles you own that
Do you own, lea someone else dri	ase, or have legal or equitives. If you lease a vehicle,	also report it on Sched	ule G: Executory Contracts and		ehicles you own that
Do you own, leasomeone else dri	ase, or have legal or equit	also report it on Sched	ule G: Executory Contracts and		ehicles you own that
Do you own, leasomeone else dri	ase, or have legal or equitives. If you lease a vehicle,	also report it on Sched	ule G: Executory Contracts and		ehicles you own that
Do you own, leasomeone else dri Cars, vans, tr	ase, or have legal or equitives. If you lease a vehicle,	also report it on Sched	ule G: Executory Contracts and		ehicles you own that
Do you own, leasomeone else dri	ase, or have legal or equitives. If you lease a vehicle,	also report it on Sched	ule G: Executory Contracts and		ehicles you own that
Do you own, leasomeone else dri 3. Cars, vans, tr No	ase, or have legal or equit ives. If you lease a vehicle, rucks, tractors, sport utili	also report it on Sched	ule G: Executory Contracts and	Unexpired Leases.	ehicles you own that
Do you own, leasomeone else dri Cars, vans, tr No Yes 3.1 Make:	ase, or have legal or equit ives. If you lease a vehicle, rucks, tractors, sport utili Hyundai	also report it on Sched	ule G: Executory Contracts and	Do not deduct secured content amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i>
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model:	ase, or have legal or equit ives. If you lease a vehicle, rucks, tractors, sport utili Hyundai Elantra	also report it on Schedity vehicles, motorcycl Who has an inter	ule G: Executory Contracts and	Do not deduct secured content amount of any secure	laims or exemptions. Put
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year:	ase, or have legal or equitives. If you lease a vehicle, rucks, tractors, sport utili Hyundai Elantra	who has an inte	ule G: Executory Contracts and es rest in the property? Check one	Do not deduct secured c the amount of any secur Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima	Hyundai Elantra 2017 ate mileage: 1037	who has an inter Debtor 1 only Debtor 2 only Debtor 1 and 0	es rest in the property? Check one Debtor 2 only	Do not deduct secured of the amount of any securing Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor	Hyundai Elantra 2017 ate mileage: 10379 armation:	who has an inter Debtor 1 only Debtor 2 only Debtor 1 and 0	ule G: Executory Contracts and es rest in the property? Check one	Do not deduct secured c the amount of any secur Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li	Hyundai Elantra 2017 ate mileage: 1037	who has an inter Debtor 1 only Debtor 1 and I Debtor 1 and I At least one of	es rest in the property? Check one Debtor 2 only	Do not deduct secured c the amount of any secur Creditors Who Have Cla	laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi	Hyundai Elantra 2017 ate mileage: 10379 ate mileage: 10379 ate model in the first of the first o	who has an inter Debtor 1 only Debtor 1 and I Debtor 1 and I At least one of	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured control the amount of any secure Creditors Who Have Clate Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi	Hyundai Elantra 2017 ate mileage: 10379 rmation: ien 5/22/2019 Elean Trade Value	who has an inter Debtor 1 only Debtor 2 only At least one of	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured control the amount of any secure Creditors Who Have Clate Current value of the entire property?	laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi	Hyundai Elantra 2017 ate mileage: 10379 ate mileage: 10379 ate model in the first of the first o	who has an inter Debtor 1 only Debtor 2 only At least one of	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured of the amount of any securic Creditors Who Have Clar Current value of the entire property?	laims or exemptions. Put ed claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? \$10,200.00
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi	Hyundai Elantra 2017 ate mileage: 10379 ate mileage: 10379 ate model in the first of the first o	Who has an inter Debtor 1 only Debtor 2 only Debtor 1 and I At least one of Check if this (see instructions	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property? \$10,200.00	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a	Hyundai Elantra 2017 ate mileage: mation: ien 5/22/2019 clean Trade Value inanced is of 12.6.2021	Who has an inter Debtor 1 only Debtor 2 only Debtor 1 and I At least one of Check if this (see instructions	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any secure of the amount of any secure of the amount of any secure.	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model:	Hyundai Elantra 2017 Ite mileage: 10379 Item 5/22/2019 Itean Trade Value Inanced Is of 12.6.2021 Chrysler Town & Country 2008	Who has an interpolate of the control of the contro	es rest in the property? Check one Debtor 2 only the debtors and another is community property	Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any secure of the amount of any secure of the amount of any secure.	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model: Year: Approxima	Hyundai Elantra 2017 ate mileage: 10379 clean Trade Value inanced as of 12.6.2021 Chrysler Town & Country 2008 ate mileage: 14309 ate mileage: 14309	Who has an interpolate of the control of the contro	rest in the property? Check one Debtor 2 only the debtors and another is community property Test in the property? Check one	Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any securic Creditors Who Have Class Carditors Who Have Class Carditors Who Have Class Carditors Who Have Class Carditors Carditor	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model: Year: Approxima Other infor Other infor Other infor Other infor	Hyundai Elantra 2017 ate mileage: 10379 clean Trade Value inanced as of 12.6.2021 Chrysler Town & Country 2008 ate mileage: 14309 cmation: 1	Who has an inter Debtor 1 and I Debtor 1 and I Check if this (see instructions Who has an inter Debtor 2 only Debtor 3 and I Debtor 4 and I Debtor 5 an inter Debtor 6 an inter Debtor 1 and I Debtor 7 and I Debtor 1 and I	rest in the property? Check one Debtor 2 only the debtors and another is community property Test in the property? Check one	Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model: Year: Approxima Other infor Keep, Li Control Contr	Hyundai Elantra 2017 ate mileage: 10379 clean Trade Value inanced as of 12.6.2021 Chrysler Town & Country 2008 ate mileage: 14309 cmation: ien 5/18/2020	Who has an inter Debtor 1 and I Debtor 1 and I Check if this (see instructions Who has an inter Debtor 2 only Debtor 1 and I At least one of Debtor 1 only Debtor 2 only At least one of	rest in the property? Check one Debtor 2 only the debtors and another is community property rest in the property? Check one	Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model: Year: Approxima Other infor Keep, Li NADA A	Hyundai Elantra 2017 ate mileage: 10379 clean Trade Value inanced as of 12.6.2021 Chrysler Town & Country 2008 ate mileage: 14309 cmation: ien 5/18/2020 average Trade Value as	Who has an inter Debtor 1 and I Debtor 1 and I At least one of Who has an inter Debtor 2 only Check if this (see instructions Who has an inter Debtor 2 only At least one of At least one of Check if this (see instructions	rest in the property? Check one Debtor 2 only the debtors and another is community property Debtor 2 only the debtors and another cest in the property? Check one	Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Do you own, leasomeone else dri 3. Cars, vans, tr No Yes 3.1 Make: Model: Year: Approxima Other infor Keep, Li NADA C Not Refi Payoff a 3.2 Make: Model: Year: Approxima Other infor Keep, Li NADA A of 9/21/2	Hyundai Elantra 2017 ate mileage: 10379 clean Trade Value inanced as of 12.6.2021 Chrysler Town & Country 2008 ate mileage: 14309 cmation: ien 5/18/2020 average Trade Value as	Who has an inter Debtor 1 and I Debtor 1 and I Check if this (see instructions Who has an inter Debtor 2 only Debtor 1 and I At least one of Debtor 1 only Debtor 2 only At least one of	rest in the property? Check one Debtor 2 only the debtors and another is community property Debtor 2 only the debtors and another cest in the property? Check one	Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property? \$10,200.00 Do not deduct secured of the amount of any securic Creditors Who Have Class Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$10,200.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the

Official Form 106A/B Schedule A/B: Property page 1

_	ebtor 1 ebtor 2	Gary Lynn A Jessica Sue		known)
	Examples _	, ,	or homes, ATVs and other recreational vehicles, other vehicles, and accessorie motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	s
	■ No			
l	☐ Yes			
5			the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here	=> \$12,675.00
Pa	rt 3: Des	scribe Your Perso	nal and Household Items	
De	o you ow	n or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and fo es: Major applian	urnishings ces, furniture, linens, china, kitchenware	
	_	Describe		
			Misc household goods and furnishings, including but not limited to: large and small appliances, , kitchen, dining room, bedroom, living room furniture and furnishings, and lawn and garden. No	
			one item valued more than \$400	\$355.00
7.	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games Household Electronics which includes 2 TV's, 4 cell phones and 1	
			laptop	\$375.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamons, memorabilia, collectibles	np, coin, or baseball card collections;
9.	Example	ent for sports ares: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; c	canoes and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	_ ′		s, shotguns, ammunition, and related equipment	
	■ No □ Yes.	Describe		
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
	. 00.	_ 50000		
			Misc wearing apparel. No one item valued more than \$20	\$200.00

	btor 2		•	-	e Ande		•				Case number (if known)	
	Jewelry Examp □ No ■ Yes.	oles			ewelry, o	cost	tume jewelr	y, engageme	ent ri	ngs, wedding rings, heirloon	n jewelry, watches, gems,	gold, silver
								welry. No c ne jewelry	one	item valued more than	\$400 which	\$25.00
	■ No □ Yes.	oles De	: Dog scribe	s, cats	, birds, ł							
	■ No ■ Yes.						_	ou did not a	airea	dy list, including any heal	th aids you did not list	
15.										luding any entries for pag	es you have attached	\$955.00
Pai	rt 4: Des	scri	he Yo	ur Fina	ncial Ass	sets						
								erest in any	of tl	ne following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No							your home,		safe deposit box, and on ha	nd when you file your peti	tion
											Cash on hand	\$18.00
	Deposit Examp □ No ■ Yes	oles	: Che insti	cking, s tutions					the	tificates of deposit; shares in same institution, list each. stitution name:	n credit unions, brokerage	houses, and other similar
					17.	1.	Checking	g-xxx1642	С	hase		\$0.90
					17.2	2.	Checking	g-xxx1790	Li	ncoln Savings Bank		\$18.76
		oles	: Bon	d funds		mer			•	irms, money market account	ts	
19.	Non-pu joint ve			aded s	tock ar	nd ii	nterests in	incorporate	ed ar	nd unincorporated busines	sses, including an intere	st in an LLC, partnership, and
	■ No □ Yes.	Giv	/e spe	ecific in			about them. le of entity:				% of ownership:	
20.	Negotia	abl	e inst	rument	s includ	е ре	ersonal che	cks, cashiers	s' ch	nd non-negotiable instrume ecks, promissory notes, and comeone by signing or delive	money orders.	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2	Gary Lynn Anderson, II Jessica Sue Anderson			Case number (if known)	
■ No					
☐ Yes	. Give specific information about th Issuer nam				
	ement or pension accounts	1 40441			
Exan ■ No	nples: Interests in IRA, ERISA, Keo	gh, 401(k), 403(b), thri	ft savings accounts, or other pe	ension or profit-sharing plar	ns
	s. List each account separately. Type of accou	unt: Ins	titution name:		
Your <i>Exan</i>	rity deposits and prepayments share of all unused deposits you ha nples: Agreements with landlords, p				or others
□ No ■ Yes	b	Ins	titution name or individual:		
	Residential		onarch Investment 00.00		\$0.00
23. Ann u	ities (A contract for a periodic payn	ment of money to you	either for life or for a number of	vears)	
■ No	, , , , , , , , , , , , , , , , , , , ,	, ,		youro	
⊔ Yes	lssuer name and d	escription.			
26 U.S	sts in an education IRA, in an acc S.C. §§ 530(b)(1), 529A(b), and 529		BLE program, or under a qua	llified state tuition progra	m.
■ No □ Yes	Institution name an	nd description. Separat	ely file the records of any intere	ests.11 U.S.C. § 521(c):	
	s, equitable or future interests in	property (other than	anything listed in line 1), and	I rights or powers exercis	sable for your benefit
■ No □ Yes	s. Give specific information about the	nem			
	nts, copyrights, trademarks, tradenples: Internet domain names, webs	•		nts	
■ No	s. Give specific information about the	nem			
	ses, franchises, and other genera				
	nples: Building permits, exclusive lic		sociation holdings, liquor licens	ses, professional licenses	
	. Give specific information about the	nem			
Money o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax r o □ No	efunds owed to you				
_	s. Give specific information about th	em, including whether	you already filed the returns ar	nd the tax years	
				-	
		possible tax refu	nd		\$0.00
29. Famil	y support				
Exan	nples: Past due or lump sum alimon	ıy, spousal support, ch	ild support, maintenance, divor	ce settlement, property set	tlement
■ No □ Yes	s. Give specific information				

	ebtor 1 ebtor 2	Gary Lynn Anderson, II Jessica Sue Anderson	Case number (if known)	
30.			disability benefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No	benefits; unpaid loans you made to someone	else	
	☐ Yes.	Give specific information		
31.		ts in insurance policies bles: Health, disability, or life insurance; health savi	ngs account (HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes.	Name the insurance company of each policy and li		
		Company name:	Beneficiary:	Surrender or refund value:
	If you a some o	terest in property that is due you from someone are the beneficiary of a living trust, expect proceeds one has died. Give specific information	e who has died s from a life insurance policy, or are currently entitled to rec	eive property because
		·		
33.	Examµ ■ No	against third parties, whether or not you have oles: Accidents, employment disputes, insurance cl		
	☐ Yes.	Describe each claim		
34.	Other o	contingent and unliquidated claims of every nat	ture, including counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
35.	Any fin ■ No	nancial assets you did not already list		
	☐ Yes.	Give specific information		
36			, including any entries for pages you have attached	\$37.66
Pa	rt 5: De	scribe Any Business-Related Property You Own or Ha	ve an Interest In. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any busi	iness-related property?	
ı	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Pro ou own or have an interest in farmland, list it in Part 1.	operty You Own or Have an Interest In.	
46.	Do you	ı own or have any legal or equitable interest in a	any farm- or commercial fishing-related property?	
	■ No.	Go to Part 7.		
	☐ Yes	. Go to line 47.		
Pa	nrt 7:	Describe All Property You Own or Have an Interest	in That You Did Not List Above	
53.		have other property of any kind you did not all oles: Season tickets, country club membership	ready list?	
	■ No	Give specific information		
	□ res.	Oive specific information		
E 1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	he dellar value of all of your entries from Part 7	Write that number here	\$0.00

Debtor 1 Gary Lynn Anderson, II
Debtor 2 Jessica Sue Anderson

Case number (if known)

55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$12,675.00		
57.	Part 3: Total personal and household items, line 15		\$955.00		
58.	Part 4: Total financial assets, line 36		\$37.66		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$13,667.66	Copy personal property total	\$13,667.66
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$13,667.66

Fill in this infor	mation to identify your	case:		
Debtor 1	Gary Lynn Ander	son, II		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica Sue Ande	erson		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _				
				☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	cruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Check only one box for each exemption. Schedule A/B			
	2017 Hyundai Elantra 103794 miles Keep, Lien 5/22/2019	\$10,200.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
	NADA Clean Trade Value Not Refinanced Payoff as of 12.6.2021 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)
	Misc household goods and	\$355.00		\$355.00	Ohio Rev. Code Ann. §
	furnishings, including but not limited to: large and small appliances, , kitchen, dining room, bedroom, living room furniture and furnishings, and lawn and garden. No one item valued more than \$400 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)
	Household Electronics which	\$375.00		\$375.00	Ohio Rev. Code Ann. §
	includes 2 TV's, 4 cell phones and 1 laptop Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)
	Misc wearing apparel. No one item valued more than \$20	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	Line from Schedule A/B: 11.1			100% of fair market value, up to	

any applicable statutory limit

Case number (if known)

Schedule A/B that lists this property	portion you own Copy the value from	Che	eck only one box for each exemption.	
	Schedule A/B	One	on only one box for each exemption.	
lisc items of jewelry. No one item ralued more than \$400 which	\$25.00		\$25.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
ncludes costume jewelry ine from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
cash on hand ine from Schedule A/B: 16.1	\$18.00		\$18.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
ine non concease 702. Peri			100% of fair market value, up to any applicable statutory limit	2020:00(1)(0)
Checking-xxx1642: Chase	\$0.90		\$0.90	Ohio Rev. Code Ann. § 2329.66(A)(3)
ine nom <i>Genedale Alb.</i> 1111			100% of fair market value, up to any applicable statutory limit	2020:00(1)(0)
hecking-xxx1790: Lincoln Savings	\$18.76		\$18.76	Ohio Rev. Code Ann. § 2329.66(A)(3)
ne from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	2020:00(1:)(0)
ossible tax refund	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
The Hoth Confedence 70 B. 2011			100% of fair market value, up to any applicable statutory limit	2020.00(13)(10)
ossible tax refund	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	
ossible tax refund ne from Schedule A/B: 28.1	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(9)(f)
The Hoth Generale AVB. 2011			100% of fair market value, up to any applicable statutory limit	2020:00(17)(0)(1)
re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	nt.)
Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	.215 days before you filed this case	?
□ No	za z, alo okompaon wi		,	

Fill in	this information to identify yo	ur case:			
Debtor	r 1 Gary Lynn And	erson, II			
Debtor	First Name	Middle Name Last Name			
(Spouse		Middle Name Last Name			
United	States Bankruptcy Court for the	SOUTHERN DISTRICT OF OHIO		-	
Case r	number n)			_	if this is an
	ial Form 106D edule D: Creditors	s Who Have Claims Secure	d by Propert	у	12/15
is neede		If two married people are filing together, both are edout, number the entries, and attach it to this form. C			
1. Do an	ny creditors have claims secured b	y your property?			
	No. Check this box and submit	this form to the court with your other schedules. Y	ou have nothing else t	to report on this form.	
	Yes. Fill in all of the information	below.			
Part 1	List All Secured Claims				
2. List	all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
	h claim. If more than one creditor ha as possible, list the claims in alphabe	Value of collateral that supports this claim	Unsecured portion If any		
	Bridgecrest	Describe the property that secures the claim:	\$15,877.24	\$10,200.00	\$5,677.24
С	Creditor's Name	2017 Hyundai Elantra 103794 miles Keep, Lien 5/22/2019 NADA Clean Trade Value Not Refinanced Payoff as of 12.6.2021			
	Po Box 29018 Phoenix, AZ 85038	As of the date you file, the claim is: Check all that apply. Contingent			
N	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.			
_	otor 1 only otor 2 only	☐ An agreement you made (such as mortgage or se car loan)	cured		
Deb	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a mmunity debt	Other (including a right to offset) Automobil	le		
	Opened 05/19 Last				

Last 4 digits of account number

4001

Date debt was incurred Active 05/21

Debtor 1 Gary Lynn Anderson, II		Case number (if known)		
First Name Middle M	Name Last Name			
Debtor 2 Jessica Sue Anderson				
First Name Middle N	Name Last Name			
2.2 Shalash Sales & Service,	Describe the property that secures the claim:	\$2,502.26	\$2,475.00	\$27.26
Creditor's Name	2008 Chrysler Town & Country	1		
oreans or rains	143054 miles			
	Keep, Lien 5/18/2020			
	NADA Average Trade Value as of			
	9/21/2021			
	Payoff as of 12.6.2021			
	Not Refinanced			
1607 Webster Street	As of the date you file, the claim is: Check all that	_		
Dayton, OH 45404	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_				
Debtor 1 only	An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Automol	bile		
Date debt was incurred 5/18/2020	Last 4 digits of account number 447	5		
Add the deller value of value and in the	California A an thin many Milita that more bearing	¢40.070.5		
If this is the last page of your form, add	Column A on this page. Write that number here:	\$18,379.5		
Write that number here:	i tile dollar value totals from all pages.	\$18,379.5	0	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:						
Debtor 1 Gary Lynn Anderson, II						
	iddle Name Last Name					
Debtor 2 Jessica Sue Anderson						
(Spouse if, filing) First Name N	iddle Name Last Name					
United States Bankruptcy Court for the: SOUT	HERN DISTRICT OF OHIO					
Case number						
(if known)					Check i	f this is an
					amende	ed filing
Official Form 100F/F						
Official Form 106E/F						40/45
Schedule E/F: Creditors Who H Be as complete and accurate as possible. Use Part 1						12/15
Schedule G: Executory Contracts and Unexpired Leas Schedule D: Creditors Who Have Claims Secured by F eft. Attach the Continuation Page to this page. If you name and case number (if known).	Property. If more space is needed, copy th	e Part	you need, fill it out, r	number the	entries in	the boxes on the
Part 1: List All of Your PRIORITY Unsecured	l Claims					
1. Do any creditors have priority unsecured claims	against you?					
☐ No. Go to Part 2.						
■ Yes.						
 List all of your priority unsecured claims. If a cre- identify what type of claim it is. If a claim has both pr possible, list the claims in alphabetical order accordi Part 1. If more than one creditor holds a particular cl 	ority and nonpriority amounts, list that claim ling to the creditor's name. If you have more the	here a	nd show both priority a	nd nonprior	ty amounts	s. As much as
(For an explanation of each type of claim, see the in-	structions for this form in the instruction book	let.)				
			Total claim	Priority amount		Nonpriority amount
2.1 Bankruptcy Reporting Contact	Last 4 digits of account number 468	84	\$0.00		\$0.00	\$0.00
Priority Creditor's Name	When we the debt in surred					
Office of Child Support PO Box 183203	When was the debt incurred?					
Columbus, OH 43218-3203						
Number Street City State Zip Code	As of the date you file, the claim is: C	heck a	ll that apply			
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	☐ Unliquidated					
☐ Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
☐ At least one of the debtors and another	■ Domestic support obligations					
☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you ov	we the	government			
Is the claim subject to offset?	☐ Claims for death or personal injury w		-			
■ No	☐ Other. Specify					
☐ Yes	Child Support					

Debtor 1 Gary Lynn Anderson, II	
Debtor 2 Jessica Sue Anderson	Case number (if known)

2.2 Butler County CSEA Priority Creditor's Name 315 High St. Hamilton, OH 45011 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured cla Domestic support obligations Taxes and certain other debts y Claims for death or personal inj	is: Check all that	ernment	\$0.00	\$0.00
□ Yes	Other. Specify Child Supp	oort			
2.3 Fairborn City Schools District Tax Priority Creditor's Name 306 E. Whittier Ave. Fairborn, OH 45324 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts you claims for death or personal inj Other. Specify	2020 is: Check all the	ernment ere intoxicated	\$284.00	\$0.00
2.4 Fairborn City Schools District Tax Priority Creditor's Name 306 E. Whittier Ave. Fairborn, OH 45324 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts you claims for death or personal injuiced Other. Specify	4022 2019 is: Check all the	\$82.00 at apply ernment ere intoxicated	\$82.00	\$0.00

ewer 's Name norne Street 1, OH 45042 City State Zip Code debt? Check one. ebtor 2 only the debtors and another laim is for a community debt cct to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the contingent Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts you Claims for death or personal injuty Other. Specify Child Supp	is: Check all th im: ou owe the gov	vernment	\$1,407.49	\$0.00
r's Name norne Street 1, OH 45042 City State Zip Code debt? Check one. ebtor 2 only the debtors and another laim is for a community debt ct to offset?	As of the date you file, the claim is Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts you Claims for death or personal injuty Other. Specify	im: ou owe the gov ury while you w	at apply		V
City State Zip Code debt? Check one. ebtor 2 only the debtors and another laim is for a community debt ct to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured clai ☐ Domestic support obligations ☐ Taxes and certain other debts you ☐ Claims for death or personal inju	im: ou owe the gov ury while you w	vernment		
ebtor 2 only the debtors and another laim is for a community debt ct to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured clai ☐ Domestic support obligations ☐ Taxes and certain other debts you ☐ Claims for death or personal inju	im: ou owe the gov ury while you w	vernment		
the debtors and another laim is for a community debt ct to offset?	☐ Disputed Type of PRIORITY unsecured clai Domestic support obligations ☐ Taxes and certain other debts you ☐ Claims for death or personal injut ☐ Other. Specify	ou owe the gov ury while you w			
the debtors and another laim is for a community debt ct to offset?	Type of PRIORITY unsecured clai ■ Domestic support obligations □ Taxes and certain other debts yellow Claims for death or personal injutation of the control of the cont	ou owe the gov ury while you w			
the debtors and another laim is for a community debt ct to offset?	Type of PRIORITY unsecured clai ■ Domestic support obligations □ Taxes and certain other debts yellow Claims for death or personal injutation of the control of the cont	ou owe the gov ury while you w			
the debtors and another laim is for a community debt ct to offset?	☐ Taxes and certain other debts ye ☐ Claims for death or personal inju	ury while you w			
ct to offset?	☐ Claims for death or personal inju☐ Other. Specify	ury while you w			
aild Cumpart		ort			
allal Cummont					
nild Support	Last 4 digits of account number	4684	\$0.00	\$0.00	\$0.00
	When was the debt incurred?				
OH 43218-3203	As of the date you file, the claim	is: Check all th	at apply		
debt? Check one.	☐ Contingent				
	☐ Unliquidated				
	<u> </u>				
ebtor 2 only	·	im:			
•	■ Domestic support obligations				
laim is for a community debt	`	ŭ			
	, ,	, ,			
		ort		_	
	vi 33203 OH 43218-3203 City State Zip Code debt? Check one. ebtor 2 only the debtors and another laim is for a community debt cct to offset?	As of the date you file, the claim debt? Check one. As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured cla Taxes and certain other debts you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured cla Taxes and certain other debts you file, the claim Contingent Type of PRIORITY unsecured cla Claims for a community debt Claims for death or personal injuty Other. Specify	As of the date you file, the claim is: Check all the debt? Check one. Contingent Unliquidated Disputed	As of the date you file, the claim is: Check all that apply debt? Check one. As of the date you file, the claim is: Check all that apply debt? Check one. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations I aim is for a community debt of the detail of the claim is: Check all that apply Type of PRIORITY unsecured claim: Claims for a community debt of Claims for death or personal injury while you were intoxicated Other. Specify Child Support	As of the date you file, the claim is: Check all that apply debt? Check one. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations laim is for a community debt ct to offset? Child Support

Total claim

Part 2.

	1 Gary Lynn Anderson, II 2 Jessica Sue Anderson		Case number (if known)	
4.1	Ad Astra Recovery Serv	Last 4 digits of account number	6581	\$204.00
	Nonpriority Creditor's Name	_	One and 00/40 Least Asting	
	7330 W 33rd Street North Wichita, KS 67205	When was the debt incurred?	Opened 06/19 Last Active 01/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify 166-Oh	Attorney Speedycash.Com	
4.2	Allied Cash Advance Nonpriority Creditor's Name	Last 4 digits of account number		\$711.22
	5103 Springboro Pike Road Dayton, OH 45439	When was the debt incurred?	May 2021	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Payday loa	n	
4.3	Amer Fst Fin	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name 7330 W. 33rd Street Wichita, KS 67205	When was the debt incurred?	Opened 5/22/20 Last Active 8/14/20	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 , , ,	or oncor an inac apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		

☐ Yes

■ Other. Specify Lease

Debt	or 1 Gary Lynn Anderson, II or 2 Jessica Sue Anderson		Case number (if known)	
4.4	Ars Account Resolution	Last 4 digits of account number	3951	\$712.00
	Nonpriority Creditor's Name 1643 Nw 136th Ave	When was the debt incurred?	Opened 08/18 Last Active 07/17	
	Sunrise, FL 33323			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Collection of the control of the con	Attorney Premier Emer Cr Svc	
4.5	Ars Account Resolution	Last 4 digits of account number	0305	\$538.00
	Nonpriority Creditor's Name		Opened 06/19 Last Active	
	1643 Nw 136th Ave Sunrise, FL 33323	When was the debt incurred?	05/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Ohio Emer Profs Inc.	
4.6	Ars Account Resolution	Last 4 digits of account number	0338	\$503.00
	Nonpriority Creditor's Name	_	Omenad 05/40 Least Active	
	1643 Nw 136th Ave Sunrise, FL 33323	When was the debt incurred?	Opened 05/19 Last Active 04/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	

☐ Yes

Other. Specify Inc.

Collection Attorney Premier Emer Cr Svc

tor 2 Jessica Sue Anderson		Case number (if known)	
Ars Account Resolution	Last 4 digits of account number	8694	\$503.00
Nonpriority Creditor's Name 1643 Nw 136th Ave Sunrise, FL 33323	When was the debt incurred?	Opened 02/19 Last Active 12/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Inc.	Attorney Premier Emer Cr Svc	
Bullcity Financial Sol	Last 4 digits of account number	7324	\$217.0
Nonpriority Creditor's Name 1107 W Main St Durham, NC 27701	When was the debt incurred?	Opened 10/19 Last Active 09/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Collection	Attorney Duke Energy	
Cac Fin Coll	Last 4 digits of account number	2172	\$94.0
Nonpriority Creditor's Name 2601 Nw Expressway Oklahoma City, OK 73112	When was the debt incurred?	Opened 1/09/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	

debt

■ No

☐ Yes

■ Other. Specify Medical

☐ Student loans

report as priority claims

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 \square Check if this claim is for a community

Is the claim subject to offset?

	Debtor 1 Gary Lynn Anderson, II Debtor 2 Jessica Sue Anderson		Case number (if known)	
4.1 0	Capital Community Bank	Last 4 digits of account number	8131	\$1.00
	Nonpriority Creditor's Name 3280 N. University Avenue Provo, UT 84604	When was the debt incurred?	Opened 04/20 Last Active 8/03/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin Other. Specify	g plans, and other similar debts	
4.1	Carfinsvcs Nonpriority Creditor's Name	Last 4 digits of account number	4475	\$3,011.00
	59 Skyline Drive Lake Mary, FL 32746	When was the debt incurred?	Opened 4/27/20 Last Active 5/29/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Automobile	•	
4.1 2	Carfinsvcs Nonpriority Creditor's Name	Last 4 digits of account number	0910	\$0.00
	59 Skyline Drive Lake Mary, FL 32746	When was the debt incurred?	Opened 04/20 Last Active 07/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	. J	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Automobile	•	

Debtor Debtor	Gary Lynn Anderson, II Jessica Sue Anderson		Case number (if known)	
4.1	Cbe Group Nonpriority Creditor's Name	Last 4 digits of account number	6045	\$148.00
	131 Tower Park Drive Suite 100 Waterloo, IA 50704	When was the debt incurred?	Opened 06/20 Last Active 08/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Communication	Attorney Charter ations	
4.1	Cbe Group Nonpriority Creditor's Name	Last 4 digits of account number	2751	\$99.00
	131 Tower Park Drive Suite 100 Waterloo, IA 50704	When was the debt incurred?	Opened 02/21 Last Active 05/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alatan.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Collection Attorney Charter Other. Specify Communications		
4.1	Cnac - In101 Nonpriority Creditor's Name	Last 4 digits of account number	2989	\$4,741.00
	12802 Hamilton Crossing Blvd. Carmel, IN 46032	When was the debt incurred?	Opened 07/16 Last Active 7/23/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Automobile		

Commity Bank Last 4 digits of account number 6881 \$926.00	Debt Debt	or 1 Gary Lynn Anderson, II or 2 Jessica Sue Anderson		Case number (if known)	
PO Box 182124 Columbus, OH 43218 Number Street City State 2 Code Who incurred the debt? Check one. Columbus, OH 43218 Consumer Adjustment Co Contingent Columbus Contingent Columbus Contingent Columbus Contingent Columbus Columbus		<u> =</u>	Last 4 digits of account number	6881	\$926.00
Poebtor 1 and Debtor 2 only Debtor 1 and Debtor 3 ond another Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 ond 3 only Debtor 1 and Debtor 3 ond 3 only Debtor 1 and Debtor 3 ond 3 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 operation or profits-sharing plans, and other similar debts Debtor 5 operation or profits-sharing plans, and other similar debts Debtor 5 operation 0 only Debtor 5		PO Box 182124	When was the debt incurred?		
Debtor 2 only Debtor 1 and Debtor 2 only Disputed		Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Check if this claim is for a community debt Student loans Check if this claim subject to offset? Consumer Adjustment Co Check State Chec		Debtor 2 only	Unliquidated		
debt Is the claim subject to offset? No		_		d claim:	
At least one of the debtors and another Check if this claim is for a community debt		debt		ration agreement or divorce that you did not	
Consumer Adjustment Co			<u>_</u>	g plans, and other similar debts	
Nonpriority Creditor's Name 12855 Tesson Ferry Road Saint Louis, Mo Sai 28 Number Street City State Zip Code When was the debt incurred? Opened 08/19			Other. Specify		
12855 Tesson Ferry Road Saint Louis, MO 63128 As of the date you file, the claim is: Check all that apply	4.1 7		Last 4 digits of account number	0593	\$626.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 2 only Debtor 3 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 4 only Debtor 3 only Debtor 4 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only		12855 Tesson Ferry Road	When was the debt incurred?	Opened 08/19	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 tleast one of the debtors and another Student loans Debtor 4 only Debtor 5 cediors Name Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 tleast one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 5 check if this claim is for a community debt Student loans Debtor 5 contingent Student loans Debtor 6 contingent Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 claim subject to offset? Student loans Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 claim subject to offset? Student loans Debtor 4 only Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as priority claims Debtor 5 censuration agreement or divorce that you did not report as pr		Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Opened 07/09 Last Active 5/28/21 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Contingent Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 at least one of the debtors and another Check if this claim is for a community debt Student loans Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts					
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did			☐ Disputed		
Step Collection Specific Specific Collection Specific Spec			<u> </u>	d claim:	
Dept Of Education/neIn Nonpriority Creditor's Name Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts 1 Debts 1 Debts 1 Debts 2 Debts 2 Debts 2 Debts 3 Debts 3 Debts 4 Debts 4 Debts 4 Debts 4 Debts 5 Debts 6 Debts 6 Debts 6 Debts 6 Debts 6 Debts 7 Debts 7 Debts 7 Debts 7 Debts 7 Debts 7 Debts 8 Debts 9 D		debt		ration agreement or divorce that you did not	
Dept Of Education/neIn Nonpriority Creditor's Name Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts of Education/neIn Last 4 digits of account number State 5/28/21 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Solution Nonpriority Creditor's Name Last 4 digits of account number Solution		Yes	Other. Specify Collection	Attorney Check N Go Ipdl	
Po Box 82561 Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 offset? Student loans Debtor 7 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 8 only only only only only only only only		•	Last 4 digits of account number	3549	\$6,843.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify		Po Box 82561	When was the debt incurred?		
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify □		Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □		Debtor 1 only	☐ Contingent		
Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify		Debtor 2 only	☐ Unliquidated		
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify		Debtor 1 and Debtor 2 only	-		
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No		lacksquare At least one of the debtors and another			
■ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify		debt	☐ Obligations arising out of a sepa		
☐ Yes ☐ Other. Specify		<u> </u>		a plane, and other similar dobts	
			<u> </u>	g pians, and outer similar debis	
		□ res			

Debtor Debtor	Gary Lynn Anderson, II Jessica Sue Anderson		Case number (if known)	
4.1 9	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	7649	\$5,725.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 06/09 Last Active 5/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ll	
4.2 0	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3749	\$4,195.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 12/09 Last Active 5/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ll	
4.2 1	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3449	\$2,296.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 06/09 Last Active 5/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l	

Debtor Debtor	1 Gary Lynn Anderson, II 2 Jessica Sue Anderson		Case number (if known)	
4.2	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3849	\$2,032.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 12/09 Last Active 5/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? report as priority claims		a plane and other similar debte	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	☐ Other. Specify		
4.2				
3	Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number	3649	\$1,123.00
	Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 10/09 Last Active 5/28/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ı	
4.2	Dpt Ed/slm Nonpriority Creditor's Name	Last 4 digits of account number	1201	\$0.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 4/14/10 Last Active 2/03/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	

Debtor 1 Gary Lynn Anderson, II Debtor 2 Jessica Sue Anderson			Case number (if known)		
4.2 5	Dpt Ed/slm	Last 4 digits of account number	2201	\$0.00	
	Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 4/14/10 Last Active 2/03/12		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not		
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify			
	☐ res	Educationa	ı		
		Luucationa			
4.2 6	Equifax Nonpriority Creditor's Name	Last 4 digits of account number	·	\$0.00	
	PO Box 740241 Atlanta, GA 30374	When was the debt incurred?	Charles III that are he		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тпат аррну		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
		Debts to pension or profit-sharin	a plane, and other similar debte		
	■ No □ Yes	Other. Specify Notice only			
4.2	Experian	Last 4 digits of account number		\$0.00	
	Nonpriority Creditor's Name PO Box 2002	When was the debt incurred?			
	Allen, TX 75013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Notice only	•		

Debto	or 1 Gary Lynn Anderson, II or 2 Jessica Sue Anderson		Case number (if known)	
4.2 8	Jefferson Capital Systems, LLC	Last 4 digits of account number	0655	\$1,065.67
	Nonpriority Creditor's Name 16 McLeland Road Saint Cloud, MN 56303	When was the debt incurred?	06/04/2021	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	<u>-</u>		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	og plans, and other similar debts	
			,	
	Yes	Other. SpecifyJudgement	t/CVF2100655/Webbank	
4.2 9	Lvnv Funding Llc	Last 4 digits of account number	6946	\$196.00
	Nonpriority Creditor's Name C/o Resurgent Capital Services PO Box 10587	When was the debt incurred?	Opened 05/18 Last Active 01/18	
	Greenville, SC 29603			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Fingerhut I	Company Account Webbank Freshstart	
4.3	National Credit Adjust	Look & divite of account number	4659	\$903.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		ψ303.00
	P.o. Box 550 Hutchinson, KS 67504	When was the debt incurred?	Opened 12/15 Last Active 02/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed		
		Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u viuiiii	
	☐ Check if this claim is for a community debt	<u></u>	protion agreement or diverse that you did not	
	Is the claim subject to offset?	■ Obligations arising out of a separement as priority claims	aration agreement or divorce that you did not	

■ No

☐ Yes

Other. Specify Store

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Factoring Company Account The Cash

Debtor 1 Gary Lynn Anderson, II Debtor 2 Jessica Sue Anderson			Case number (if known)					
4.3 1	Possible Financial Inc	Last 4 digits of account number	3W60	\$315.00				
	Nonpriority Creditor's Name 500 Yale Ave. N Seattle, WA 98109	When was the debt incurred?	Opened 08/20 Last Active 10/02/20					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another							
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Unsecured						
	■ No □ Yes							
		— Other. Specify						
4.3	Possible Financial Inc Nonpriority Creditor's Name	Last 4 digits of account number	UT1G	\$0.00				
	500 Yale Ave. N Seattle, WA 98109	When was the debt incurred?	Opened 05/20 Last Active 8/18/20					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i						
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin						
	Yes	Other. Specify Unsecured						
4.3 3	Trans Union LLC Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00				
	P.O. Box 6790 Fullerton, CA 92834	When was the debt incurred?						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed						
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin						
	Yes	■ Other. Specify Notice only						

Debtor 1 Gary Lynn Anderson, II Debtor 2 Jessica Sue Anderson			Case number (if known)				
4.3	Transworld System Inc/	Last 4 digits of account number	4922	\$180.00			
	Nonpriority Creditor's Name Po Box 15095 Wilmington, DE 19850	When was the debt incurred?	Opened 12/19 Last Active 06/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Collection Specialists	Collection Attorney Emergency Medicine				
4.3 5	Webbank/fingerhut	Last 4 digits of account number	1389	\$0.00			
	Nonpriority Creditor's Name 13300 Pioneer Trail Eden Prairie, MN 55347	When was the debt incurred?	Opened 04/17 Last Active 01/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Charge Acc					
4.3 6	Webbank/fingerhut Fres Nonpriority Creditor's Name	Last 4 digits of account number	6946	\$0.00			
	13300 Pioneer Trail Eden Prairie, MN 55347	When was the debt incurred?	Opened 12/17 Last Active 01/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
		Debts to pension or profit-sharin	a plane, and other similar debts				
	■ No	•					
	☐ Yes ☐ Other. Specify Installment Sales Contract						

		n Anderson, II Sue Anderson		Case n	umber (if kno	own)		
4.3 7	/ebbank/fi	ngerhut Fres	Last 4 digits of account number	1769)		\$0.00	
I' I	onpriority Cre	_				_	·	
	3300 Pion	eer Trail e, MN 55347	When was the debt incurred?	Ope 4/06		Last Active		
		City State Zip Code	As of the date you file, the claim	is: Chec	k all that app	ly		
WI	ho incurred	the debt? Check one.						
-	Debtor 1 on	ly	☐ Contingent					
	Debtor 2 on	ly	☐ Unliquidated					
	Debtor 1 an	d Debtor 2 only	☐ Disputed					
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if thi	is claim is for a community	☐ Student loans					
	ebt the claim su	bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration a	greement or o	divorce that you did not		
	No		Debts to pension or profit-sharing	ng plans,	and other sir	milar debts		
	l Yes		Other. Specify Installment	t Sales	Contract			
Part 3:	List Others	s to Be Notified About a D	ebt That You Already Listed					
notified for Name and A Ashley N 30500 Va	or any debts Address II. Nonis-F	in Parts 1 or 2, do not fill out	On which entry in Part 1 or Part 2 did you Line 4.28 of (Check one):	u list the o Part 1: Part 2:	original credit Creditors wit	•		
Name and Address Fairborn Municipal Court 1148 Kauffman Avenue			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.28 of (Check one):					
Fairborn	, OH 4532	24	Last 4 digits of account number 0655					
Part 4:	Add the A	mounts for Each Type of l	Jnsecured Claim					
6. Total the		certain types of unsecured cl	aims. This information is for statistical i	reporting	g purposes o	only. 28 U.S.C. §159. Add th	ne amounts for each	
type or u	iisecuieu cie	ann.				Total Claim		
Total	6a.	Domestic support obligation	ns	6a.	\$	1,407.49		
claims from Part 1	I 6b.	Tayon and partain other deb	ate you awe the government	6b.	œ.	202.00		
IIOIII Fait I	6c.		ots you owe the government al injury while you were intoxicated	6c.	\$	366.00 0.00		
	6d.	•	nsecured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a th	nrough 6d.	6e.	\$	1,773.49		
						Total Claim		
Total claims	6f.	Student loans			\$	22,214.00		
from Part 2	2 6g.		separation agreement or divorce that	60	\$	0.00		
	6h.	you did not report as priorit Debts to pension or profit-s	y claims haring plans, and other similar debts	6g. 6h.	\$	0.00		
	6i.	•	ty unsecured claims. Write that amount	6i.		15 603 80		

6j.

Total Nonpriority. Add lines 6f through 6i.

15,693.89

37,907.89

Fill in this information to identify your case:						
Debtor 1	Gary Lynn Ander	son, II			l	
	First Name	Middle Name	Last Name		İ	
Debtor 2	Debtor 2 Jessica Sue Anderson					
(Spouse if, filing)	First Name	Middle Name	Last Name		ı	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO		İ	
Case number (if known)						
						ded filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Monarch Investment 1733 Arlin Place Fairborn, OH 45324	Residential Rent/Lease/Monthly Pmt. \$702.00
2.2	Snap RTO LLLC PO Box 26561 Salt Lake City, UT 84126	Crankshaft position sensor/and brake inspection/Lease/ 10.84 weekly/ Lease eneds 4/05/2022

Fill in this	information to identify you	ır case:		
Debtor 1	Gary Lynn Ande	erson, II		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filir	Jessica Sue An First Name	derson Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	SOUTHERN DISTRI	CT OF OHIO	
Case numl	ber			
(if known)				Check if this is an
				amended filing
Officia	l Form 106H			
Sched	lule H: Your Co	debtors		12/15
•	and case number (if know you have any codebtors? (, , , ,	ion. se, do not list either spouse as	a codebtor.
■ No □ Yes	;			
			property state or territory? Puerto Rico, Texas, Washing	(Community property states and territories include ton, and Wisconsin.)
	Go to line 3. Did your spouse, former sp	ouse, or legal equivalent	live with you at the time?	
in line Form out Co	2 again as a codebtor only 106D), Schedule E/F (Offici olumn 2. Column 1: Your codebtor	, if that person is a gua al Form 106E/F), or Sch	rantor or cosigner. Make su	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to fi
ſ	Name, Number, Street, City, State and	ZIP Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
_				☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			
	City	State	ZIP Code	

Fill	n this information to id	dentify your ca	ase:		
Deb	otor 1 G	ary Lynn A	Anderson, II		
	otor 2	essica Sue	Anderson		
Uni	ed States Bankruptcy	Court for the	: SOUTHERN DISTRIC	CT OF OHIO	
Cas (If kr	e number own)				Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
	ficial Form 1				MM / DD/ YYYY
	chedule I: Yo				12/15 d Debtor 2), both are equally responsible for
spo	ise. If you are separa	ated and you	ır spouse is not filing wi	th you, do not include information	with you, include information about your about your spouse. If more space is needed,
spo	use. If you are separate that separate sheet to Describe E	ated and you o this form.	ır spouse is not filing wi	th you, do not include information	about your spouse. If more space is needed, ase number (if known). Answer every question.
spo atta Par	use. If you are separate has separate sheet to the separate sheet sheet to the separate sheet	ated and you o this form. mployment ment	ır spouse is not filing wi	th you, do not include information onal pages, write your name and ca	about your spouse. If more space is needed,
spo atta Par	te. If you are separate has separate sheet to te. Describe E Fill in your employr information. If you have more tha attach a separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate separate painformation about additional in the separate separ	ated and you o this form. mployment ment n one job, ge with	ır spouse is not filing wi	th you, do not include information onal pages, write your name and ca	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filing spouse
spo atta Par	te. If you are separate has separate sheet to te. Describe E Fill in your employr information. If you have more tha attach a separate pa	ated and you o this form. mployment ment n one job, ge with	r spouse is not filing wi On the top of any additi	Debtor 1 Employed	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filing spouse
spo atta Par	te. If you are separate has separate sheet to te. Describe E Fill in your employr information. If you have more tha attach a separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate painformation about additional in the separate separate painformation about additional in the separate separ	ment n one job, ge with ditional	r spouse is not filing wi On the top of any additi	Debtor 1 Employed Not employed	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filling spouse Employed Not employed
spo atta Par	Describe E Fill in your employr information. If you have more tha attach a separate painformation about ad employers. Include part-time, sea	mployment ment n one job, ge with ditional asonal, or	r spouse is not filing wi On the top of any addition Employment status	Debtor 1 Employed Not employed Field Supervisor	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filling spouse Employed Not employed
spo atta Par	Describe E Fill in your employr information. If you have more tha attach a separate painformation about ad employers. Include part-time, seself-employed work. Occupation may include the part include the par	mployment ment n one job, ge with ditional asonal, or	r spouse is not filing wi On the top of any addition Employment status Occupation Employer's name	Debtor 1 Employed Not employed Field Supervisor Roto Rooter Services, Co. 255 E. 5th Street, Suite 2500 Cincinnati, OH 45202	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filling spouse Employed Not employed
spo atta Par	Describe E Fill in your employr information. If you have more tha attach a separate painformation about ad employers. Include part-time, sea self-employed work. Occupation may include or homemaker, if it a	mployment ment n one job, ge with ditional asonal, or ude student pplies.	er spouse is not filing wi On the top of any addition Employment status Occupation Employer's name Employer's address	Debtor 1 Employed Not employed Field Supervisor Roto Rooter Services, Co. 255 E. 5th Street, Suite 2500 Cincinnati, OH 45202	about your spouse. If more space is needed, ase number (if known). Answer every question. Debtor 2 or non-filling spouse Employed Not employed

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,166.67 0.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. \$ 4. 2,166.67 0.00

Case number (if known)

				For	Debtor 1		btor 2 or ing spouse	
	Copy line 4 here		4.	\$	2,166.67	\$	0.00	
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Securit	tv deductions	5a.	\$	290.77	\$	0.00	
	5b. Mandatory contributions for retire		5b.	\$_	0.00	\$	0.00	
	5c. Voluntary contributions for retire	-	5c.	\$	0.00	\$	0.00	
	5d. Required repayments of retireme		5d.	\$_	0.00	\$	0.00	
	5e. Insurance		5e.	\$_	267.28	\$	0.00	
	5f. Domestic support obligations		5f.	\$	0.00	\$	0.00	
	5g. Union dues		5g.	\$_	0.00	\$	0.00	
	5h. Other deductions. Specify: life i	insurance	5h.+	- \$-		+ \$	0.00	
	dental insurance		_	\$	19.50	\$	0.00	
	vision insurance		_	\$	18.50	\$	0.00	
	accidental death insurance		_	\$	3.42	\$	0.00	
	short/long term disability		_	\$	47.88	\$	0.00	
	Critical Illness		_	\$	27.52	\$	0.00	
6.	Add the payroll deductions. Add lines 5	5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	704.55	\$	0.00	
7.	Calculate total monthly take-home pay.	_	7.	\$	1,462.12	\$	0.00	
8.	List all other income regularly received 8a. Net income from rental property a profession, or farm Attach a statement for each propert receipts, ordinary and necessary but monthly net income.	l: and from operating a business, ry and business showing gross	8a.	\$	0.00	\$	0.00	
	8b. Interest and dividends		8b.	\$	0.00	\$	0.00	
	regularly receive Include alimony, spousal support, c settlement, and property settlement 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance tha Include cash assistance and the val	at you regularly receive lue (if known) of any non-cash assistance ups (benefits under the Supplemental	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$\$ \$\$	0.00 0.00 0.00	
	8g. Pension or retirement income		 8g.	\$	0.00	\$	0.00	
		Monthly Commission NET average	8h.+	- \$	2,722.15	+ \$	0.00	
9.	Add all other income. Add lines 8a+8b+	8c+8d+8e+8f+8g+8h.	9.	\$	2,722.15	\$	360.00	
10	Calculate monthly income. Add line 7 +	- line 9.	10. \$		4,184.27 + \$	360	0.00 = \$ 4,	544.27
	Add the entries in line 10 for Debtor 1 and				+,104.27 ·	300		J-7.21
11.	State all other regular contributions to Include contributions from an unmarried p other friends or relatives. Do not include any amounts already included specify:	artner, members of your household, your o	depen	,	,	,	edule J. 11. +\$	0.00
	Add the amount in the last column of li Write that amount on the Summary of Sch applies Do you expect an increase or decrease	nedules and Statistical Summary of Certair	n Liab				12. \$ 4,	
	■ No.	-						

Yes. Explain: Debtor anticipates no changes in income over next 12 months.

Fill	in this informa	ation to identify y	our case:					
Deb	otor 1	Gary Lynn A	nderson	, II		Che	ck if this is:	
	otor 2 ouse, if filing)	Jessica Sue	Anderso	on			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			MM / DD / YYYY	
Cas	e number							
	nown)							
Of	fficial Fo	orm 106J						
Be info	as complete ormation. If m		s possible eded, atta	. If two married people ar				
Par 1.	t 1: Desc	ribe Your House	ehold					
••	□ No. Go to							
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		_ 1	■ Yes
					Son		5	□ No
					3011			■ Yes ■ No
					Son		13	■ No □ Yes
								□ No
3.	Do your ox	noneae includa	_					☐ Yes
J.	expenses of	penses include of people other t d your depende	han _—	No Yes				
exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners		uses for your residence. In	nclude first mortgage	e 4. §	S	702.00
	. ,	ded in line 4:	5					
						40 4	•	0.00
		estate taxes erty, homeowner'	s. or renter	's insurance		4a. \$ 4b. \$		0.00 16.00
	•	•		upkeep expenses		4c. \$		0.00
		eowner's associa				4d. \$		0.00
5.	Additional	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	S	0.00

eptor 1				
ebtor 2	Jessica Sue Anderson	Case num	ber (if known)	
Util	lities:			
. Util 6a.		6a.	\$	317.00
6b.	•	6b.		76.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.		6d.	·	0.00
	od and housekeeping supplies	— 7.	·	1,250.00
	ildcare and children's education costs	8.	\$	90.00
Clo	thing, laundry, and dry cleaning	9.	\$	230.68
	sonal care products and services	10.	\$	160.00
	dical and dental expenses	11.	\$	170.00
. Tra	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	350.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.		140.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance	150	¢	0.00
	a. Lire insurance b. Health insurance	15a. 15b.		0.00
	c. Vehicle insurance	15b. 15c.	*	0.00
		150. 15d.	·	82.00
	I. Other insurance. Specify:	13u.	\$	0.00
	(es. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00
	tallment or lease payments:		Ψ	0.00
	a. Car payments for Vehicle 1	17a.	\$	0.00
17b	o. Car payments for Vehicle 2	17b.	\$	0.00
17c	c. Other. Specify: SNAP Finance Brake Sensor	17c.	\$	43.36
	I. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as			
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		317.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	_	
	ner real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	a. Mortgages on other property	20a.		0.00
	Real estate taxes Proporty homogyanaria or reptoria incurance	20b.	· · · · · · · · · · · · · · · · · · ·	0.00
	c. Property, homeowner's, or renter's insurance	20c. 20d.	· ·	0.00
	Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues	20a. 20e.	·	0.00
			ъ +\$	0.00
Oth	ner: Specify:		+φ	0.00
Cal	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	4,144.04
22b	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,144.04
Cəl	culate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	A 5AA 97
	Copy your monthly expenses from line 22c above.	23a. 23b.	·	4,544.27 4,144.04
230	. Oopy your monthly expenses normine 220 above.	۷۵۵.		4,144.04
230	s. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	400.23
_				
	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease bocause s
	example, do you expect to finish paying for your car loan within the year or do you expect your dification to the terms of your mortgage?	mongage	payment to increase	or decrease because o
■				
	Yes Explain here: Debtor anticipates no change in expenses ov	or nove	12 months	
	TES LEXIDIAID DETECTION AUTHORITIES NO COANGE IN EXPENSES OF	ei next	iz monus.	

Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20	Fill in this inform	nation to identify your	case:		
Debtor 2 Jessica Sue Anderson First Name Middle Name Last	Debtor 1	Gary Lynn Ander	son, II		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number ((Iknown)) Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1				Last Name	-
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number (Iknown) Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? NO Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 X /s/ Jessica Sue Anderson Signature of Debtor 2					_
Case number (If known) Check if this is an amended filing	(Spouse if, filing)	First Name	Middle Name	Last Name	
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 X Isl Jessica Sue Anderson Jessica Sue Anderson Jessica Sue Anderson Signature of Debtor 2	United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	_
Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 X Isl Jessica Sue Anderson Signature of Debtor 2					☐ Check if this is an
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Signature of Debtor 1 X /s/ Jessica Sue Anderson Signature of Debtor 2					amended filing
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Signature of Debtor 1 X /s/ Jessica Sue Anderson Signature of Debtor 2	Official Form	n 106Dec			
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 X /s/ Jessica Sue Anderson Signature of Debtor 2			ın Individual	Debtor's Schedules	12/15
■ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) X /s/ Jessica Sue Anderson Jessica Sue Anderson Signature of Debtor 2	obtaining money years, or both. 18	or property by fraud in BU.S.C. §§ 152, 1341, 1	n connection with a bank		
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) X /s/ Jessica Sue Anderson Jessica Sue Anderson Signature of Debtor 2	Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy form	as?
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 Declaration, and Signature (Official Form 119) X /s/ Jessica Sue Anderson Jessica Sue Anderson Signature of Debtor 2	■ No				
that they are true and correct. X /s/ Gary Lynn Anderson, II Gary Lynn Anderson, II Signature of Debtor 1 X /s/ Jessica Sue Anderson Jessica Sue Anderson Signature of Debtor 2	☐ Yes. N	ame of person			
Gary Lynn Anderson, II Signature of Debtor 1 Jessica Sue Anderson Signature of Debtor 2	•		that I have read the sum	mary and schedules filed with this decl	aration and
Gary Lynn Anderson, II Signature of Debtor 1 Jessica Sue Anderson Signature of Debtor 2	X /s/ Garv	Lynn Anderson, II		X /s/ Jessica Sue Anderso	on .
Date December 13, 2021 Date December 13, 2021	Signature	e of Debtor 1		Signature of Debtor 2	
	Date D	ecember 13, 2021		Date December 13, 202	1

		nation to identify you				
De	ebtor 1	Gary Lynn Ande	erson, II Middle Name	Last Name		
De	ebtor 2	Jessica Sue And		Lastivanie		
1 1	ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
0	aa aumhar					
1	ase number					☐ Check if this is an amended filing
_	fficial Fo		Affairs for Indivi	duals Filing for	· Bankruptcy	4/1:
info	ormation. If m mber (if knowr	ore space is needed, n). Answer every que	ible. If two married people a attach a separate sheet to stion. arital Status and Where You	this form. On the top of		
				Lived Before		
1.	what is you	r current marital statu	15 ?			
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
		t all of the places you	ived in the last 3 years. Do no	ot include where you live	now.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior	r Address:	Dates Debtor 2 lived there
		ean Drive, Apt, 111 OH 45426	6 From-To: 07/2018-05/20	■ Same as Deb	otor 1	■ Same as Debtor 1 From-To:
	719 17th A Middletow	venue rn, OH 45044	From-To: 07/2016-07/20	Same as Det	otor 1	Same as Debtor 1 From-To:
3. sta			ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne			r territory? (Community property ton and Wisconsin.)
	☐ Yes. Ma	ake sure you fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	art 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including p	part-time activities.	ous calendar years?
	□ No					
	_	in the details.				
			Debtor 1		Dobtor 2	
				Onese les es	Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of income d Check all that app	

Debtor 1	Gary Lynn Anderson, II		
Debtor 2	Jessica Sue Anderson	Case number (if known)	

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app	
	om January e date you f		rent year until ankruptcy:	■ Wages, commissions, bonuses, tips	\$34,330.00	■ Wages, comm bonuses, tips	sissions, \$5,881.00
				☐ Operating a business		Operating a bu	usiness
	or last calen anuary 1 to		er 31, 2020)	■ Wages, commissions, bonuses, tips	\$65,409.00	☐ Wages, comm bonuses, tips	sissions, \$0.00
				☐ Operating a business		Operating a bu	usiness
	or the calend anuary 1 to		before that: er 31, 2019)	■ Wages, commissions, bonuses, tips	\$23,543.00	☐ Wages, commo	issions, \$0.00
				☐ Operating a business		☐ Operating a bu	usiness
	winnings.	f you are	filing a joint cas	se and you have income that yome from each source separa	ou received together, list it o	only once under Debi	
				Debtor 1	0	Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incor Describe below.	me Gross income (before deductions and exclusions)
	om January e date you f		rent year until ankruptcy:	Early Retirement Withdrawal	\$768.97		
Pa	rt 3: List	Certain	Payments You	Made Before You Filed for	Bankruptcy		
6.	Are either □ No.	Neither individua	Debtor 1 nor D al primarily for a	's debts primarily consumer Debtor 2 has primarily consumer personal, family, or househouse you filed for bankruptcy, di	umer debts. Consumer debt ld purpose."		J.S.C. § 101(8) as "incurred by an
		□ No.		.			
		□ Yes	paid that cr		nts for domestic support obliq		nents and the total amount you d support and alimony. Also, do
		* Subje	ct to adjustmen	t on 4/01/22 and every 3 years	s after that for cases filed on	or after the date of a	adjustment.
	Yes.			or both have primarily consure you filed for bankruptcy, di		al of \$600 or more?	
		■ No.	Go to line 7	,			
		□ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.			ou paid that creditor. Do not so, do not include payments to an
	Creditor'	s Name a	and Address	Dates of payme	nt Total amount	Amount you still owe	Was this payment for

	btor 1 btor 2	Gary Lynn Anderson, II Jessica Sue Anderson		Cas	se number (if F	known)		
7.	<i>Inside</i> of whi	n 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	erships of whi g securities; a	ch you and an	u are a genera ly managing a	al partner; corporations gent, including one for
	_	No						
		Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount paid	Amount y		Reason for	this payment
8.	inside	n 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos			any property	on ac	ecount of a de	ebt that benefited an
		No						
		Yes. List all payments to an insider						
	Insic	der's Name and Address	Dates of payment	Total amount paid	Amount y still o		Reason for Include cred	this payment itor's name
Par	rt 4:	Identify Legal Actions, Repossession	ns. and Foreclosures					
_								
List a		n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes.						
_	No							
	Yes. Fill in the details.							
		e title e number	Nature of the case	Court or agency			Status of the case	
	vs Gar	erson Capital Systems, LLC y Anderson II 2100655	Civil	Fairborn Munic 1148 Kauffman Fairborn, OH 4	Avenue		☐ Pending ☐ On appe ☐ Conclud	
10.		n 1 year before you filed for bankrupt k all that apply and fill in the details below		rty repossessed, f	oreclosed, g	jarnis	hed, attached	I, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.						
	Cred	litor Name and Address	Describe the Property			Date		Value of the property
			Explain what happened					,
11.		n 90 days before you filed for bankrup unts or refuse to make a payment bec		uding a bank or fir	nancial instit	ution	, set off any a	mounts from your
	_	No Yes. Fill in the details.						
		litor Name and Address	Describe the action the	creditor took			action was	Amount
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess		taken signee		efit of creditors, a
	_	No						
		vo Yes						
	_	103						

	otor 2 Jessica Sue Anderson	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
		cy, did you give any gifts with a total value of more t	han \$600 per person?	,
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
4.		cy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	t 6: List Certain Losses			
5.	or gambling? ■ No □ Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose any		
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
6.	consulted about seeking bankruptcy or prep	y, did you or anyone else acting on your behalf pay oparing a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Richard E. West Co. LPA 195 E. Central Ave. Springboro, OH 45066	Attorney Fees with remainder to be paid out in plan	8/31/2021	\$137.00
7 .	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date navment	Amount of
	Address	transferred	Date payment or transfer was made	payment

	btor 2 Jessica Sue Anderson			Case number (if known)				
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already	business or financial af made as security (such as	fairs? the granting of a s					
	No No							
	Yes. Fill in the details. Person Who Received Transfer	Description and	value of	Describe any property or	Date transfer was			
	Address	property transfe		payments received or debts paid in exchange	made			
	Person's relationship to you							
19.	Within 10 years before you filed for bankri beneficiary? (These are often called asset-p		iny property to a s	self-settled trust or similar device	of which you are a			
	☐ Yes. Fill in the details.							
	Name of trust	Description and	value of the prop	erty transferred	Date Transfer was made			
Par	rt 8: List of Certain Financial Accounts, I	Instruments, Safe Depos	sit Boxes, and Sto	rage Units				
20.	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass No Yes. Fill in the details.	, or other financial acco	unts; certificates o	of deposit; shares in banks, credit	, ,			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	e of Financial Institution and Last 4 digits of Type of account or		nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	Sutton Bank 1 South Main Street PO Box 505 Attica, OH 44807	xxxx-3525	☐ Checking ☐ Savings ☐ Money Mark ☐ Brokerage ☐ Other Cash		\$0.00			
	The Bancorp Bank 95 Morton Street, Fifth Floor New York, NY 10014	XXXX-6710	☐ Checking ☐ Savings ☐ Money Mark ☐ Brokerage ■ Other <u>Venr</u>		\$0.00			
21.								
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?			
22.	Have you stored property in a storage uni		ur home within 1 y	rear before you filed for bankrupto	cy?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?			

Pai	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10: Give Details About Environmental Inform	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used					
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.						
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	No No								
	Yes. Fill in the details.			2					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	t 11: Give Details About Your Business or Cor	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Debtor 2	, ,		Ca	se number (if known)
	No. None of the above applies. Go to	Part 12.		
	Yes. Check all that apply above and fi	II in the details be	elow for each business.	
Ad	siness Name dress mber, Street, City, State and ZIP Code)		ature of the business	Employer Identification number Do not include Social Security number or ITIN.
(1142	mbor, direct, dity, diate and his deady	Name of accou	mant or bookkeeper	Dates business existed
	hin 2 years before you filed for bankrup itutions, creditors, or other parties. No Yes. Fill in the details below.	otcy, did you give	a financial statement to a	nyone about your business? Include all financial
Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued		
Part 12:	Sign Below			
are true with a ba		a false statement,	concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
/s/ Gar	y Lynn Anderson, II	/s/ Jes	ssica Sue Anderson	
	ynn Anderson, II ire of Debtor 1		ca Sue Anderson ure of Debtor 2	
Date _	December 13, 2021	Date	December 13, 2021	
Did you ■ No □ Yes	attach additional pages to Your Statem	nent of Financial A	Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did you ■ No	pay or agree to pay someone who is no	ot an attorney to h	nelp you fill out bankruptc	y forms?
□ Yes. N	Name of Person Attach the <i>Bankr</i>	ruptcy Petition Prep	parer's Notice, Declaration, a	and Signature (Official Form 119).

LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Gary Lynn Anderson, II Jessica Sue Anderson		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. Disclosure

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in contemp follows:	petition in bankruptcy,	or agreed to be paid to me, f
F	or legal services, I have agreed to accept	\$	4,350.00
P	ior to the filing of this statement I have received	\$	137.00
В	alance Due	\$	4,213.00
 3. 	The source of the compensation paid to me was: ■ Debtor □ Other (specify): The source of compensation to be paid to me is: ■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with an associates of my law firm.	y other persons unless the	ney are members and/or
	☐ I have agreed to share the above-disclosed compensation with anothe of my law firm. A copy of the agreement, together with a list of the rattached.		

II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$4,350, for rendering the legal services set forth below. If I seek payment of fees in excess of \$4,350, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy:
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - c. Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be required;
 - d. Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

- will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).
- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in the submission of the annual tax return or the retaining of the tax refund pursuant to the Mandatory Form Chapter 13 Plan, exclusive of any subsequent inquiry, amendment, status report, motion, objection or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Exemption planning and case review. Debtors are advised that there is no absolute right to reaffirm for market value, that they should be current on secured debt to reaffirm, and that they may reaffirm, surrender or redeem by payment, lump sum, of fair market value of collateral on secured debts. Representation is conditioned on compliance with the written fee agreement which the client signed. Debtors agree and understand that in the event that they fail to comply with the terms of the fee agreement, the attorneys may seek to withdraw from representation by making the appropriate application with the court.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

The client(s) agree(s) that the written fee agreement provides for all matters included and excluded. Clients agree that, in the event that the law firm has a schedule conflict, the firm may designate another attorney to appear at any hearing on behalf of client(s).

Date

/s/ Stephen Malkiewicz

Stephen Malkiewicz 0078836

Name

Richard E. West Co. LPA 195 E. Central Ave. Springboro, OH 45066 937-601-0401 Fax: 937-552-2138 ecf@debtfreeohio.com 0078836 OH

Debtor(s) and law firm may enter into an hourly fee agreement, instead of the "no-look" provisions, pursuant to LBR 2016-1 (b) (2) (C).

Fill in this information to identify your case:					
Debtor 1 Gary Lynn Anderson		ı, II			
Debtor 2 (Spouse, if filing)	Jessica Sue Anders	on			
United States B	ankruptcy Court for the:	Southern District of Ohio			
Case number (if known)					

Che	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined und 11 U.S.C. § 1325(b)(3).	er					
	 Disposable income is determined under 1 U.S.C. § 1325(b)(3). 	1					
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. §

				Colui Debt		Colum Debto non-fi	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	ommissio	ons (before all	\$	2,590.71	\$	248.05
Alimony and maintenance payments. Do not include Column B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	0.00
Il amounts from any source which are regularly p f you or your dependents, including child suppor om an unmarried partner, members of your househol nd roommates. Do not include payments from a spoulou listed on line 3. let income from operating a business,	t. Includ ld, your	le regulaı depende	contributions nts, parents,	\$	0.00	\$	0.00
profession, or farm	Debtor	1					
ross receipts (before all deductions)	\$_	0.00					
rdinary and necessary operating expenses	- \$ _	0.00					
et monthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
oss receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
let monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

	ary Lynn Anderson, II ssica Sue Anderson			Case number	r (if known)		
				Column A Debtor 1		Column B Debtor 2 c		
7 Interest	, dividends, and royalties			\$	0.00	•	0.00	
	loyment compensation			\$	0.00		0.00	
Do not e	enter the amount if you contend that the alial Security Act. Instead, list it here:	mount received was a bene	efit under	<u> </u>	0.00	_	- 0.00	
	ou	\$ 0	.00					
	our spouse		0.00					
9. Pension benefit unot inclu United S disability pay paid does no	n or retirement income. Do not include a under the Social Security Act. Also, excepted any compensation, pension, pay, annotates Government in connection with a direction of the uniformed dunder chapter 61 of title 10, then include the exceed the amount of retired pay to which under any provision of title 10 other than	ny amount received that we t as stated in the next sentu- lity, or allowance paid by the sability, combat-related inju- services. If you received ar that pay only to the extent th you would otherwise be	ence, do he ury or ny retired that it	\$	0.00	\$	0.00	
10. Income Do not i under th under th coronav crime, a compen Govern death of	from all other sources not listed above include any benefits received under the Source Federal law relating to the national emete National Emergencies Act (50 U.S.C. 1 irus disease 2019 (COVID-19); payments or crime against humanity, or international of sation, pension, pay, annuity, or allowand ment in connection with a disability, combined a member of the uniformed services. If no epage and put the total below.	e. Specify the source and a pocial Security Act; payment orgency declared by the Pre 601 et seq.) with respect to received as a victim of a word domestic terrorism; or e paid by the United States at-related injury or disability	s made esident o the var s					
оораган	page and par the total below.			\$	0.00	\$	0.00	
				\$	0.00		0.00	
	Total amounts from separate pages, if ar	ny.		\$	0.00		0.00	
each co	te your total average monthly income. lumn. Then add the total for Column A to Determine How to Measure Your Deduc	the total for Column B.	\$	2,590.71	+ \$	248.05		2,838.76
	our total average monthly income from	line 11					\$	2,838.76
	te the marital adjustment. Check one:	inie 11.					Ψ	2,030.70
☐ Yo	u are not married. Fill in 0 below.							
■ Yo	u are married and your spouse is filing wit	h you. Fill in 0 below.						
☐ Yo	u are married and your spouse is not filing	y with you.						
de	in the amount of the income listed in line pendents, such as payment of the spouse low, specify the basis for excluding this in	's tax liability or the spouse	s's suppor	t of someone	e other t	han you or you	ır depend	ents.
adj	ustments on a separate page.		come acv	olca lo caci	i puipos	o. Il ficocosary	, not addi	lioriai
If ti	his adjustment does not apply, enter 0 bel	OW.	¢					
			- Ψ \$		_			
			+\$		_			
	Total		\$	0.0	0 0	copy here=>	_	0.00
14. Your 0	current monthly income. Subtract line 1	3 from line 12.					\$	2,838.76
15. Calcul	ate your current monthly income for th	e year. Follow these steps	3:					
	Copy line 14 here=>						\$	2,838.76

Debtor 1 Debtor 2		eary Lynn Anderson, II essica Sue Anderson	Case number (if known)			
		Multiply line 15a by 12 (the number of months in a year).		X	12	
1	5b.	The result is your current monthly income for the year for this part of the form	n	\$	34,065.12	

Debtor 1	Gary Lynn Anderson, II
Debtor 2	Jessica Sue Anderson

Casa aumhar	(if Immun)		
Case number ((II KNOWN)		

16	. Calculate the median family income that applie	s to you. Follow thes	e steps:	
	16a. Fill in the state in which you live.	ОН		
	16b. Fill in the number of people in your household	i. 5		
	16c. Fill in the median family income for your state	and size of househol	<u></u> d.	_{\$} 105,175.00
	To find a list of applicable median income am instructions for this form. This list may also be			<u> </u>
17	. How do the lines compare?	avanasio at tito sam	auptoy storike emee.	
			e 1 of this form, check box 1, <i>Disposable inculation of Your Disposable Income</i> (Official F	
		Calculation of Your	form, check box 2, <i>Disposable income is de</i> Disposable Income (Official Form 122C-2	
Par	t 3: Calculate Your Commitment Period Unde	er 11 U.S.C. § 1325(b	0)(4)	
18.	Copy your total average monthly income from	ine 11 .		\$\$
19.	contend that calculating the commitment period un spouse's income, copy the amount from line 13.	der 11 U.S.C. § 1325		
	19a. If the marital adjustment does not apply, fill in	0 on line 19a.		-\$0.00
	19b. Subtract line 19a from line 18.			\$\$
20.	Calculate your current monthly income for the	year. Follow these st	reps:	
	20a. Copy line 19b			\$2,838.76
	Multiply by 12 (the number of months in a yea			x 12
	20b. The result is your current monthly income for	the year for this part o	of the form	\$34,065.12_
				e 105 175 00
	20c. Copy the median family income for your state	and size of nouseno	d from line 16c	\$ 105,175.00
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless ot period is 3 years. Go to Part 4.	nerwise ordered by th	e court, on the top of page 1 of this form, ch	eck box 3, The commitment
	Line 20b is more than or equal to line 20 commitment period is 5 years. Go to Pal		ordered by the court, on the top of page 1 of	this form, check box 4, The
Par	t 4: Sign Below			
	By signing here, under penalty of perjury I declare	that the information o	n this statement and in any attachments is to	rue and correct.
)	⟨ /s/ Gary Lynn Anderson, II		X /s/ Jessica Sue Anderson	
	Gary Lynn Anderson, II Signature of Debtor 1		Jessica Sue Anderson Signature of Debtor 2	
	Date December 13, 2021		Date December 13, 2021	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked 17a, do NOT fill out or file Form 12:	2C-2.		
	If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ad Astra Recovery Serv 7330 W 33rd Street North Wichita, KS 67205 Capital Community Bank 3280 N. University Avenue Provo, UT 84604 Fairborn City Schools District Tax 306 E. Whittier Ave. Fairborn, OH 45324

Allied Cash Advance 5103 Springboro Pike Road Dayton, OH 45439 Carfinsvcs 59 Skyline Drive Lake Mary, FL 32746 Fairborn Municipal Court 1148 Kauffman Avenue Fairborn, OH 45324

Amer Fst Fin 7330 W. 33rd Street Wichita, KS 67205 Cbe Group 131 Tower Park Drive Suite 100 Waterloo, IA 50704 Jefferson Capital Systems, LLC 16 McLeland Road Saint Cloud, MN 56303

Ars Account Resolution 1643 Nw 136th Ave Sunrise, FL 33323

Cnac - In101 12802 Hamilton Crossing Blvd. Carmel, IN 46032 Kaleigh Brewer 2220 Hawthorne Street Middletown, OH 45042

Ashley M. Nonis-Hartman 30500 Van Dyke Avenue, Suite 702 Warren, MI 48093 Comenity Bank PO Box 182124 Columbus, OH 43218 Lvnv Funding Llc C/o Resurgent Capital Services PO Box 10587 Greenville, SC 29603

Bankruptcy Reporting Contact Office of Child Support PO Box 183203 Columbus, OH 43218-3203 Consumer Adjustment Co 12855 Tesson Ferry Road Saint Louis, MO 63128 Monarch Investment 1733 Arlin Place Fairborn, OH 45324

Bridgecrest Po Box 29018 Phoenix, AZ 85038

Dept Of Education/neln Po Box 82561 Lincoln, NE 68501 National Credit Adjust P.o. Box 550 Hutchinson, KS 67504

Bullcity Financial Sol 1107 W Main St Durham, NC 27701 Dpt Ed/slm Po Box 9635 Wilkes Barre, PA 18773 Office of Child Support Enforcemen Ohio Department of Jobs and FamiS P.O. Box 183203 Columbus, OH 43218-3203

Butler County CSEA 315 High St. Hamilton, OH 45011 Equifax PO Box 740241 Atlanta, GA 30374 Possible Financial Inc 500 Yale Ave. N Seattle, WA 98109

Cac Fin Coll 2601 Nw Expressway Oklahoma City, OK 73112 Experian PO Box 2002 Allen, TX 75013 Shalash Sales & Service, LLC 1607 Webster Street Dayton, OH 45404 Snap RTO LLLC PO Box 26561 Salt Lake City, UT 84126

Trans Union LLC P.O. Box 6790 Fullerton, CA 92834

Transworld System Inc/ Po Box 15095 Wilmington, DE 19850

Webbank/fingerhut 13300 Pioneer Trail Eden Prairie, MN 55347

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